**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

		CLAIMS AS	SMALL ENTITY		OTHER THAN OR SMALL ENTITY							
TOTAL CLAIMS			30					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			3 O minus 20=		• (0			X\$ 9=		OR	X\$18=	180
INDEPENDENT CLAIMS			7 minus 3 =		* 4			X40=		OR	X80=	320
MU	TIPLE DEPEN	DENT CLAIM PF	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1810
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Co						(Column 3)	<b>)</b>	SMALL E	ENTITY	OR	OTHER SMALL	11
	. 1	CLAIMS		HIGH	IEST	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ווווו		ADDI-			ADDI-
AMENDWENT A	,	REMAINING AFTER AMENDMENT	٠	NUM PREVIO PAID	OUSLY 🥇	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	. 30	Minus	** 3		4		X\$ 9=		OR	X\$18=	
	Independent	• ")	Minus	***	1	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.105			+270=	
RCE								+135=		OR	TOTAL	
	(1)							ADDIT. FEE		OR	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	۰	NUA PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 23	Minus	** =	3°	=\		X\$ 9=		OR	X\$18=	
	Independent	* 7	Minus	***	7 TCLAIM	=	_	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
,								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		3)										
AMENDMENT C		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		HIG NUI PREV	IMN 2) HEST MBER IOUSLY ) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	ŧά		=		X\$ 9=		OR	X\$18=	,
	Independent	n	Minus	***		=		X40=	F Y		X80=	
<b>≪</b>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							740-		OR	7.50_	
+135=										OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE	
**		ımber Previously F nber Previously Pa							nronriate bo	x in c		